ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Saint Joseph Regional Medical Center-Plymouth

City: Plymouth County: Marshall Year: **2003**

Provider Type: General Acute

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	$0
Cardiac Intensive	0	0	0	$0
ICU Med/Surg	7	577	1,416	$4,349
ICU Neonatal	0	0	0	$0
ICU Pediatric	0	0	0	$0
Medical/Surgical	30	1,529	6,584	$3,419
Neonatal Intermed	0	0	0	$0
Obstetrics	8	377	758	$1,474
Pediatric	0	0	0	$0

Psychiatric	0	0	0	$0
Rehabilitation	0	0	0	$0
Substance Abuse	0	0	0	$0
Swing Beds	NA	0	0	$0
Other Services	0	0	0	NA
Acute Subtotal	45	2,483	8,758	NA
Normal Newborn	0	349	923	$1,200

II. Outpatient Visits

Circulatory System	5,018	Digestive System	2,153
Endocrine System	6,026	Injuries and Poison	4,781
Mental Disorder	830	Musculoskeletal	4,409
Neoplasms	3,683	Nervous	1,225
Respiratory	3,277	Urinary	3,856
Other/Unknown	39,225	Total Visits	74,483
Number of Visits to Emergency Department			12,233
Percent of Emergency Department Visits of Total Visits			16.4%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

N - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractic Service
N - Coronary Care Unit	N - Dental Services	Y - Dietetic Services
Y - Emergency Service	Y - Home Care Program	Y - Hospice
Y - Inpatient Surgical Services	Y - Intensive Care Unit	Y - Laboratory(Clinical)
Y - Laboratory(Anatomical)	N - Long Term Care Unit	N - Neonatal Nursery
Y - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	N - Open Heart Surgery	Y - Operating Room
N - Optometric Service	Y - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	Y - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
N - Psychiatric Services	Y - Radiology(Diagnostic)	Y - Radiology(Therapeutic)
Y - Rehabilitation Services	Y - Respiratory Services	N - Self Care Unit
N - Shock Trauma	Y - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported

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